

# CLAIMS ONLY

SERIAL NO.	FILING DATE
APPLICANT(S)	

BEST  
AVAIL  
CO

## CLAIMS

	AS FILED		AFTER 1st AMENDMENT		AFTER 2nd AMENDMENT	
	IND.	DEP.	IND.	DEP.	IND.	DEP.
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TOTAL IND.	1					
TOTAL DEP.	1					
TOTAL CLAIMS	1					

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TOTAL IND.								
TOTAL DEP.								
TOTAL CLAIMS								

\* MAY BE USED FOR ADDITIONAL CLAIMS OR AMENDMENTS